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Bib Data Sheet

CONFIRMATION NO. 5571

SERIAL NUMBER 09/892,938	FILING DATE 06/27/2001 RULE	CLASS 379	GROUP ART UNIT 2645	ATTORNEY DOCKET NO. D-7173-1
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APPLICANTS
Keith A. Merwin, Jacksonville, FL;
Robert J. van Winkel, Jacksonville, FL;

**** CONTINUING DATA ******* *yes AA*
THIS APPLICATION IS A CIP OF 09/605,477 06/28/2000

**** FOREIGN APPLICATIONS ******* *Name AA*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY **
**** 07/26/2001**

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after <i>Allegiance</i>	STATE OR COUNTRY FL	SHEETS DRAWING 6	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 2
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Verified and Acknowledged *Allegiance* *AA*
Examiner's Signature Initials

ADDRESS
Arthur G. Yeager, P.A.
Suite 1305
112 West Adams Street
Jacksonville, FL 32202

TITLE
Computerized system for the receipt, recordation, scheduling and redelivery of telephone messages to predetermined telephone numbers

FILING FEE RECEIVED 355	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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Bb Data Sheet

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APPLICANTS Keith A. Merwin, Jacksonville, FL; Robert J. van Winkel, Jacksonville, FL;					
** CONTINUING DATA ***** This application is a CIP of 09/605,477 06/28/2000 PAT 6,731,725					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 07/26/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged		STATE OR COUNTRY FL	SHEETS DRAWING 6	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 2
ADDRESS 044885 <i>C.R.T. update 2-19-06</i> <i>ST</i>					
TITLE Computerized system for the receipt, recordation, scheduling and redelivery of telephone messages to predetermined telephone numbers					
FILING FEE RECEIVED 355	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		